

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

BETTY PAC

ADDRESS (number and street)

PO BOX 14141

☐ Check if different
than previously
reported. (ACC)

ST PAUL

MN

55114

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00405050

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M

D D D

Y Y Y Y Y Y Y

11

06

2012

in the
State of

MN

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M

D D D

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M

D D D

Y Y Y Y Y Y Y

10

01

2012

through

M M M

D D D

Y Y Y Y Y Y Y

10

17

2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jerry Samargia

Signature of Treasurer

Jerry Samargia

[Electronically Filed]

Date

M M M

D D D

Y Y Y Y Y Y Y

10

24

2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004